

## **Data Sheet**

### **Application Information**

Application Type::	Regular
Subject Matter::	Utility
Title::	FOCUS MANAGEMENT USING IN-AIR POINTS
Attorney Docket Number::	003797.00615
Request for Early Publication?::	NO
Request for Non-Publication?::	NO
Total Drawing Sheets::	6
Small Entity?::	NO

### **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Belarus
Status::	Full Capacity
Given Name::	Alexander
Middle Name::	J.
Family Name::	Kolmykov-Zotov
City of Residence::	Sammamish
State or Province of Residence::	Washington
Country of Residence::	U.S.
Street of mailing address::	339 226 <sup>th</sup> Lane NE
City of mailing address::	Sammamish
State or Province of mailing address::	Washington
Country of mailing address::	
Postal or Zip Code of mailing address::	98074

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Canada  
Status:: Full Capacity  
Given Name:: Shiraz  
Middle Name::  
Family Name:: Somji  
City of Residence:: Kenmore  
State or Province of Residence:: Washington  
Country of Residence::  
Street of mailing address:: 14711 75<sup>th</sup> Avenue NE  
City of mailing address:: Kenmore  
State or Province of mailing address:: Washington  
Country of mailing address::  
Postal or Zip Code of mailing address:: 98028

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Canada  
Status:: Full Capacity  
Given Name:: Rudolph  
Middle Name::  
Family Name:: Balaz  
City of Residence:: Redmond  
State or Province of Residence:: Washington  
Country of Residence::  
Street of mailing address:: 21625 NE 92<sup>nd</sup> Pl.  
City of mailing address:: Redmond  
State or Province of mailing address:: Washington  
Country of mailing address::  
Postal or Zip Code of mailing address:: 98053

Applicant Authority Type:: Inventor  
Primary Citizenship Country::  
Status:: Full Capacity  
Given Name:: Sam  
Middle Name::  
Family Name:: George  
City of Residence::  
State or Province of Residence::  
Country of Residence::  
Street of mailing address:: C/o Microsoft Corporation  
One Microsoft Way  
City of mailing address:: Redmond  
State or Province of mailing address:: Washington  
Country of mailing address:: U.S.  
Postal or Zip Code of mailing address:: 98052

Applicant Authority Type:: Inventor  
Primary Citizenship Country::  
Status:: Full Capacity  
Given Name:: Brigitte  
Middle Name::  
Family Name:: Krantz  
City of Residence::  
State or Province of Residence::  
Country of Residence::  
Street of mailing address:: C/o Microsoft Corporation  
One Microsoft Way  
City of mailing address:: Redmond  
State or Province of mailing address:: Washington  
Country of mailing address:: U.S.  
Postal or Zip Code of mailing address:: 98052

### **Correspondence Information**

Correspondence Customer Number:: 28319

### **Representative Information**

Representative Customer Number:: 28319

### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

### **Assignee Information**

Assignee name:: Microsoft Corporation

Street of mailing address:: One Microsoft Way

City of mailing address:: Redmond

State or Province of mailing address:: Washington

Country of mailing address:: US

Postal or Zip Code of mailing address:: 98052